

HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2003

OF THE CONDITION AND AFFAIRS OF THE

Aetna Health Inc. (a Michigan corporation)

NAIC Group			0001 (Prior Period)	NAIC Company	/ Code	95756	Employer's ID Number 23-2861565
Org	ganized unde	er the Laws	of Michigan	State	of Domicile	or Port of Ent	ry Michigan
Country of Do	omicile		United Stat	tes			
							Hospital, Medical & Dental Service or Indemnity [] ration [X] Is HMO Federally Qualified? Yes [] No [X]
Date Incorpor	rated or Orga	anized		September 10, 1996		Date Co.	mmenced Business April 1, 1998
Statutory Hor	ne Office		26933 No	rthwestern Highway, (Street and Number)			uthfield MI 48034-4728 (City, State and Zip Code)
Main Adminis	strative Office	e		26933 Northwestern (Street and		uite 100	
				I 48034-4728			
Mail Adduses						-	Code) (Telephone Number)
Maii Address							outhfield Ml 48034-4728 (City, State and Zip Code)
Primary Loca	tion of Books	s and Recor	•	26933 Northweste (Street and	rn Highway,		(city, ciato and Lip code)
			Southfield MI	48034-4728			248-208-8600
			(City, State ar	nd Zip Code)		(Area	Code) (Telephone Number)
Internet Web	site Address			www.aet	na.com		
				(Name)			(Area Code) (Telephone Number) (Extension)
			Aetna.HI	ИОReporting@aetna . (E-mail Address)	.com		
Policyowner I	Relations Co	ntact I	•	ervices, 151 Farming			T 06156 800-247-5472 (Area Code) (Telephone Number)
			(5.0.55.5.	, , ,	FICERS	,	(, (
			Allan Ir		T	reasurer (Co	ontroller) James David Weiss
Secretary	(and vice P	resident)	vviiliam	Calvin Baskin III	RESIDENTS		
				VIOLIT	KLOIDLIVIO		
			edical Director:				Burton Fred Vanderlaan, M.D.
			easurer: President:				Russell Page Smith Gregory Stephen Martino
			estment Officer	:			Kevin James Casey
		Assista	nt Controller:				Alicia Helene Bolton
				DIRECTORS	OR TRUST	EES	
	Allan	Ira Greenb	erg	Gregory St	ephen Martii	no	Burton Fred Vanderlaan, M.D.
State of	Pennsylvania	1					
County of	Montgomery	SS					
The officers of stated above, a stated, and the the assets and for the period, extent that: (1)	this reporting all of the herei at this stateme I liabilities and and have bee state law ma	in described a ent, together of the condi on completed by differ; or, (2	assets were the ab with related exhibition and affairs of in accordance wit	osolute property of the sa its, schedules and explai the said reporting entity h the NAIC Annual State or regulations require dif	nid reporting er nations therein as of the repo ement Instruction	ntity, free and on the contained, are prting period st ons and Accou	of said reporting entity, and that on the reporting period clear from any liens or claims thereon, except as herein nexed or referred to, is a full and true statement of all ate above, and of its income and deductions therefrom unting Practices and Procedures manuals except to the ted to accounting practices and procedures, according
	(Signature)			(Signa	iture)		(Signature)
	Allan Ira Gree President				vin Baskin III	/)	James David Weiss Treasurer (Controller)
				Secretary (and	VICE FIESIUEM	9	rreasurer (Controller)
Subscribed and	sworn to before		14			lo #=!= = : : '	inal filing? Vac IV 1 No I
day of		February, 200	/ 1		a.	Is this an orig	inal filing? Yes [X] No [] tate the amendment number
NOTARY PUBL	IC (Seal)				b.		late the amendment number Date filed
						3. N	lumber of pages attached

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation) EXHIBIT 3 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7							
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted							
A&H Premiums Due and Unpaid													
0299998. Premiums due and unpaid not individually listed	(45,089)	90,808	21,827	42,703	91,820	18,429							
0299999. Total group	(45,089)	90,808	21,827	42,703	91,820	18,429							
0599999. Accident and health premiums due and unpaid (Page 2, Line 12)	(45,089)	90,808	21,827	42,703	91,820	18,429							

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)

EXHIBIT 4 - HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7								
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted								

NONE

Statement as of December 31, 2003 of the EXHIBIT 5 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

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Aulliu	Alla	IVƏIƏ	UI UII	ıvaıu	Ciallis

1	2	1			Aging Analysis of Oripaid Claims												
· ·	-	3	4	5	6	7											
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total											
Claims Unpaid (Reported)																	
Aging estimated based on claims in process of adjudication as of 12/31/03	0	0	0	0	0	0											
0199999. Individually listed claims unpaid	0	0	0	0	0	0											
0299999. Aggregate accounts not individually listed - uncovered	6,493	0	0	0	60	6,553											
0399999. Aggregate accounts not individually listed - covered	162,969	5,177	12,395	417	6,496	187,454											
0499999. Subtotals	169,462	5,177	12,395	417	6,556	194,007											
0599999. Unreported claim and other claim reserves						1,232,668											
0799999. Total claims unpaid						1,426,675											

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation) EXHIBIT 6 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	Adm	nitted						
						7	8						
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current						
Amounts Due From Parent, Subsidiaries and Affiliates	Amounts Due From Parent, Subsidiaries and Affiliates												
Aetna Health Management, LLC	77,660	0	0	0	0	77,660	0						
0199999. Individually listed receivables	77,660	0	0	0	0	77,660	0						
0399999. Total gross amounts receivable	77,660	0	0	0	0	77,660	0						

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)

EXHIBIT 7 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

EXIIIDI	EXTIBIT 1 MINOSITIO DOE 10 1 MILENT, CODOIDIMINEO MINOSITIES													
1	2	3	4	5										
Affiliate	Description	Amount	Current	Non-Current										
Amounts Due To Parent, Subsidiaries and Affiliates														
	See Notes to Financial Statements	1,539,282	1,539,282	0										
0199999. Individually listed payables		1,539,282	1,539,282	0										
0399999. Total gross payables		1,539,282	1,539,282	0										

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation) EXHIBIT 8 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

	1	2	3	4	5	6
	Direct				Column 1	Column 1
	Medical	Column 1	Total	Column 3	Expenses Paid	Expenses Paid
	Expense	as a %	Members	as a %	to Affiliated	to Non-Affiliated
Payment Method	Payment	of Total	Covered	of Total	Providers	Providers
Capitation Payments:						
1. Medical groups	232,414	2.0	4,062	100.0	0	232,414
2. Intermediaries	0	0.0	0	0.0	0	0
3. All other providers	4,034	0.0	0	0.0	0	4,034
4. Total capitation payments	236,448	2.0	4,062	100.0	0	236,448
Other Payments:						
5. Fee-for-service	1,440,299	12.1	XXX	XXX	0	1,440,299
6. Contractual fee payments	10,190,349	85.9	XXX	XXX	0	10,190,349
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX	0	0
Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX	0	0
9. Non-contingent salaries	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements	0	0.0	XXX	XXX	0	0
11. All other payments	0	0.0	XXX	XXX	0	0
12. Total other payments	11,630,648	98.0	XXX	XXX	0	11,630,648
13. Total (Line 4 plus Line 12)	11,867,096	100.0	XXX	XXX	0	11,867,096

EXHIBIT 8 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
			Average	Intermediary's	Intermediary's
NAIC	Name of	Capitation	Monthly	Total Adjusted	Authorized Control
Code	Intermediary	Paid	Capitation	Capital	Level RBC

NONE

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation) EXHIBIT 9 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
			Assumulated	Book Value	Assets Not	Not Admitted
Description	Cost	Improvements	Accumulated Depreciation	Less Encumbrances	Admitted	Net Admitted Assets
			,			
Administrative furniture and equipment	0	0	0	0	0	0
Medical furniture, equipment and fixtures	0	0	0	0	0	0
Pharmaceuticals and surgical supplies	0	0	0	0	0	0
4. Durable medical equipment	0	0	0	0	0	0
5. Other property and equipment	0	0	0	0	0	0
6. Total		0	0	0	0	0
	NC	JNE				



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION.....Aetna Health Inc. (a Michigan corporation)

2. Grand Total

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR

(Location)

NAIC Group Code.....0001

NAIC Company Code.....95756

									NAIC Company (
	1	Comprehensive (H	lospital & Medical)	4	5	6	7	8	9	10	11	12	13
		2	3				Federal						
				Medicare	Vision	Dental	Employees Health	Title XVIII	Title XIX	Stop	Disability	Long-Term	
	Total	Individual	Group	Supplement	Only	Only	Benefit Plan	Medicare	Medicaid	Loss	Income	Care	Other
Total Members at end of:													
1. Prior year	8,166	37	8,129	0	0	0	0	0	0	0	0	0	0
2. First quarter	5,570	17	5,553	0	0	0	0	0	0	0	0	0	0
3. Second quarter	4,833	15	4,818	0	0	0	0	0	0	0	0	0	0
4. Third quarter	4,287	16	4,271	0	0	0	0	0	0	0	0	0	0
5. Current year	4,062	16	4,046	0	0	0	0	0	0	0	0	0	0
6. Current year member months	58,815	205	58,610	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician	63,438	221	63,217	0	0	0	0	0	0	0	0	0	0
8. Non-physician	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals	63,438	221	63,217	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred	895	0	895	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions	232	0	232	0	0	0	0	0	0	0	0	0	0
12. Health premiums collected	12,810,268	0	12,810,268	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned	12,434,533	0	12,434,533	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services	11,867,096	0	11,868,686	0	0	0	(1,590)	0	0	0	0	0	0
18. Amount incurred for provision of health care services	8,597,345	0	8,627,630	0	0	0	(30,285)	0	0	0	0	0	0

⁽a) For health business on indiciated lines report: Number of persons insured under PPO managed care products........0 and number of persons insured under indemnity only products..........0.



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION.....Aetna Health Inc. (a Michigan corporation)

2. Michigan

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

(Location)

NAIC Group Code.....0001

NAIC Company Code.....95756

									NAIC Company (
	1	Comprehensive (H		4	5	6	7	8	9	10	11	12	13
		2	3	Medicare	Vision	Dental	Federal	Title XVIII	Title XIX	Stop	Disability	Long-Term	
	Total	Individual	Group	Supplement	Only	Only	Employees Health Benefit Plan	Medicare	Medicaid	Loss	Income	Care	Other
Total Members at end of:													
1. Prior year	8,166	37	8,129	0	0	0	0	0	0	0	0	0	0
2. First quarter	5,570	17	5,553	0	0	0	0	0	0	0	0	0	0
3. Second quarter	4,833	15	4,818	0	0	0	0	0	0	0	0	0	0
4. Third quarter	4,287	16	4,271	0	0	0	0	0	0	0	0	0	0
5. Current year	4,062	16	4,046	0	0	0	0	0	0	0	0	0	0
6. Current year member months	58,815	205	58,610	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician	63,438	221	63,217	0	0	0	0	0	0	0	0	0	0
8. Non-physician	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals	63,438	221	63,217	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred	895	0	895	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions	232	0	232	0	0	0	0	0	0	0	0	0	0
12. Health premiums collected	12,810,268	0	12,810,268	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned	12,434,533	0	12,434,533	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services	11,867,096	0	11,868,686	0	0	0	(1,590)	0	0	0	0	0	0
18. Amount incurred for provision of health care services	8,597,345	0	8,627,630	0	0	0	(30,285)	0	0	0	0	0	0

⁽a) For health business on indiciated lines report: Number of persons insured under PPO managed care products........0 and number of persons insured under indemnity only products..........0.

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)

SCHEDULE A - VERIFICATION BETWEEN YEARS

1.	Book/adjusted carrying value, December 31, prior year (prior year statement)		0
2.	Increase (decrease) by adjustment:		
	2.1 Totals, Part 1, Column 10		
2	2.2 Totals, Part 3, Column 7		
3. 4.	Cost of acquired (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9))		U
4.	4.1 Totals, Part 1, Column 13		0
5.	Total profit (loss) on sales, Part 3, Column 14		
6.	Increase (decrease) by foreign exchange adjustment:	<u></u>	
٠.	4.2 Totals, Part 3, Column 9 Total profit (loss) on sales, Part 3, Column 14 Increase (decrease) by foreign exchange adjustment: 6.1 Totals, Part 1, Column 11		0
	6.2 Totals, Part 3, Column 8		
7.	Amounts received on sales, Part 3, Column 11 and Part 1, Column 12		
8.	Book/adjusted carrying value at end of current period		
9.	Total valuation allowance		
10.	Subtotal (Lines 8 plus 9)		0
11.	Total nonadmitted amounts		0
12.	Statement value, current period (Page 2, real estate lines, current period)	<u> </u>	0
	SCHEDITIED VEDICICATION DETWEEN VEADS		
	SCHEDULE B - VERIFICATION BETWEEN YEARS		
1.	Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year	<u> </u>	0
2.	Amount loaned during year:		
	2.1 Actual cost at time of acquisitions	0	
	2.2 Additional investment made after acquisitions	0	0
3.	Accrual of discount and mortgage interest points and commitment fees		0
4.	Increase (decrease) by adjustment		
5.	Total profit (loss) on sale		0
6.	Amounts paid on account or in full during the year	<u> </u>	0
7.			
8.	Increase (decrease) by foreign exchange adjustment		
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period		
10.	Total valuation allowance		
11.			
12.			
13.	Statement value of mortgages owned at end of current period		0
	SCHEDULE BA - VERIFICATION BETWEEN YEARS		
			•
1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year		0
2.	Cost of acquisitions during year:	٥	
	2.1 Actual cost at time of acquisitions	0	0
2	2.2 Additional investment made after acquisitions		0
3.	Accrual of discount		0
4.	Increase (decrease) by adjustment		
5. 6	Total profit (loss) on sale		
6. 7.	Amounts paid on account or in full during the year		0
7. 8.	Increase (decrease) by foreign exchange adjustment.		
9.	Book/adjusted carrying value of long-term invested assets at end of current period		
9. 10.	Total valuation allowance		
11.			
12.			
	Statement value of long-term invested assets at end of current period.		
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Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)
SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality and Matchity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations 1 1 2 3 4 5 6 7 8 9 10 11								11			
Quality Rating per the	1 Year	Over 1 Year	o Over 5 Years	Over 10 Years	Over 20	Total	Column 6 as a	o Total from Column	% from Col. 7	Total	Total
NAIC Designation	or Less	Through 5 Years	Through 10 Years	Through 20 Years	Years	Current Year	% of Line 10.7	6 Prior Year	Prior Year	Publicly Traded	Privately Placed (a)
1. U.S. Governments, Schedules D & DA (Group 1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
1.1 Class 1	0	2,500,000	3,603,031	0	0	6.103.031	90.8	1.061.014	58.3	6,103,031	0
1.2 Class 2.	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 Class 3.	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 Class 4.	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 Class 5.	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 Class 6.	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals.	0	2,500,000	3,603,031	0	0	6,103,031	90.8	1,061,014	58.3	6,103,031	0
All Other Governments, Schedules D & DA (Group 2)		2,000,000				, 100,001		1,001,014		, 100,001	
2.1 Class 1	616,816	0	0	0	0	616.816	9.2	757,975	41.7	616.816	0
2.2 Class 2	010,010	0	0	0	0	n	0.0	07,575	.0.0	010,010	Λ
2.3 Class 3	٥	n	Λ	n	n	0	0.0	0	0.0		n
2.4 Class 4		n	Λ	n	n	n	0.0	0	0.0		n
2.5 Class 5		n	٥	Λ	n	Λ	0.0	0	0.0		Λ
2.6 Class 6.		0	۸	۰	0	Λ	0.0	Λ	0.0	۰۰	۰
2.0 Class 0	616,816	Λ	Λ	Λ	Λ	616.816	9.2	757,975	41 7	616,816	Λ
3. States, Territories and Possessions, etc., Guaranteed,	010,010	0	0	0	0	010,010			41.7	010,010	0
Schedules D & DA (Group 3)											
3.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
	٥	0	0		0		0.0	0	0.0		٥
3.2 Class 2		0	0		0		0.0	0	0.0		٥
3.4 Class 4		0	0	0	0	0	0.0		0.0		0
		0	0	0	0	0		0			0
3.5 Class 5		0	0	0	0	0	0.0	0	0.0	0	0
3.6 Class 6		0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions,											
Guaranteed, Schedules D & DA (Group 4)	•			^			0.0	0	0.0	•	
4.1 Class 1	0	0	0]0	0	0	0.0	0	0.0	0	0
4.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Class 4	0	0	0]0	0	0	0.0	0	0.0	0	0
4.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations,											
etc., Non-Guaranteed, Schedules D & DA (Group 5)	_	_	=	_	_	_		_		-	-
5.1 Class 1	0	0	0	J0	0	0	0.0	0	0.0	0	0
5.2 Class 2	0	0	0]0	0	J	0.0	0	0.0	0	0
5.3 Class 3	0	0	0	J0	0	0	0.0	0	0.0	0	0
5.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusting Carrying Values By Major Types of Issues and NAIC Designations

Quality and watching distribution of All Bonds Owned December 31, At Book/Adjusting Carrying Values by Major Types of Issues and INAIC Designations 1 1 2 3 1 4 5 6 7 8 9 1 10								10	11		
Quality Rating per the NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10.7	Total from Column 6 Prior Year	% from Col. 7 Prior Year	Total Publicly Traded	Total Privately Placed (a)
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
6.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
6.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
6.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial & Miscellaneous (Unaffiliated),											
Schedules D & DA (Group 7)	0	0	0	0		0	0.0	0	0.0	0	0
7.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
	0		0	0	0	0	0.0	0	0.0	0	0
7.3 Class 3	0		0	0		0	0.0	0	0.0	0	0
7.4 Class 4	0		0	0	0	0	0.0	0	0.0	0	0
	0		0			0	0.0	0	0.0	0	0
7.6 Class 6	0		0			0	0.0	0	0.0	0	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)	0		0			0	0.0		0.0	0	0
8.1 Class 1	0	0	0		0	0	0.0	0	0.0	0	٥
8.2 Class 2	٥		0	0	0		0.0	0	0.0	0	0
8.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
8.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
9.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	l0	0
9.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
9.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of Issues and MAIO Designations											
	1	2	3	4	5	6	7	8	9	10	11
Quality Rating per the	1 Year	Over 1 Year	Over 5 Years	Over 10 Years	Over 20	Total	Column 6 as a	Total from Column	% from Col. 7	Total	Total
NAIC Designation	or Less	Through 5 Years	Through 10 Years	Through 20 Years	Years	Current Year	% of Line 10.7	6 Prior Year	Prior Year	Publicly Traded	Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1	616,816	2,500,000	3,603,031	0	0	6,719,847	100.0	XXX	XXX	6,719,847	0
10.2 Class 2	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.3 Class 3	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Class 4	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.5 Class 5	0	0	0	0	0	(c)0	0.0	XXX	XXX	0	0
10.6 Class 6	0	0	0	0	0	(c)0	0.0	XXX	XXX	0	0
10.7 Totals	616,816	2,500,000	3,603,031	0	0	(b)6,719,847	100.0	XXX	XXX	6,719,847	0
10.8 Line 10.7 as a % of Col. 6	9.2	37.2	53.6	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Class 1	1,818,989	0	0	0	0	XXX	XXX	1,818,989	100.0	1,818,989	0
11.2 Class 2	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.3 Class 3	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Class 4	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.5 Class 5	0	0	0	0	0	XXX	XXX	(c)0	0.0	0	0
11.6 Class 6	0	0	0	0	0	XXX	XXX	(c)0	0.0	0	0
11.7 Totals	1,818,989	0	0	0	0	XXX	XXX	(b)1,818,989	100.0	1,818,989	0
11.8 Line 11.7 as a % of Col. 8	100.0	0.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Class 1	616,816	2,500,000	3,603,031	0	0	6,719,847	100.0	1,818,989	100.0	6,719,847	XXX
12.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.7 Totals	616,816	2,500,000	3,603,031	0	0	6,719,847	100.0	1,818,989	100.0	6,719,847	XXX
12.8 Line 12.7 as a % of Col. 6	9.2	37.2	53.6	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	9.2	37.2	53.6	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

Includes \$......0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

Includes \$.......0 current year, \$.......0 prior year of bonds with Z designation was not assigned by the

Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.

Includes \$........0 current year, \$........0 prior year of bonds with 5* designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

Maturity Distribution of All Bonds Owned December 31. At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues							40				
	1 1	2	3	4	5	6	/	8	9	10	
	1 Year	Over 1 Year	Over 5 Years	Over 10 Years	Over 20	Total	Column 6 as a	Total from Column	% from Col. 7	Total	Total
Distribution by Type	or Less	Through 5 Years	Through 10 Years	Through 20 Years	Years	Current Year	% of Line 10.7	6 Prior Year	Prior Year	Publicly Traded	Privately Placed
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Issuer Obligations	0	2,500,000	3,603,031	0	0	6,103,031	90.8	1,061,014	58.3	6,103,031	0
1.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	0	2,500,000	3,603,031	0	0	6,103,031	90.8	1,061,014	58.3	6,103,031	0
2.1 Issuer Obligations	616,816	0	0	0	0	616,816	9.2	757,975	41.7	616,816	0
Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
2.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 Other	00	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	616,816	0	0	0	0	616.816	9.2	757.975	41.7	616.816	0
3. States, Territories and Possessions, Guaranteed,	,.					,.		- /			
Schedules D & DA (Group 3)		1		1		1		1			
3.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
3.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions,				0			0.0	0	0.0		0
Guaranteed, Schedules D & DA (Group 4)											
4.1 Issuer Obligations	0	0	٥	0	0	0	0.0	0	0.0	0	0
4.1 Issuel Obligations	0		0	0	0		0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:	0		0	0	0			0	0.0	0	0
				_		0	0.0	0	0.0	•	0
4.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/	0	0	0	0	0	U	0.0	0	0.0	0	0
ASSET-BACKED SECURITIES:		1		1		1		1			
	_	_	_	_	_	_		0	0.0	^	_
4.5 Defined]0	I0]0	I	Iō]0	0.0	I0	0.0]0]0
4.6 Other	0	0	0	0	0	0		0		0	<u> 0</u>
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	<u></u>
5. Special Revenue & Special Assessment Obligations, etc.,											
Non-Guaranteed, Schedules D & DA (Group 5)	_	_	_	_	_	_		_		_	_
5.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	J0
5.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	J0	0	J0	0	J0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:									_		
5.3 Defined]0	0	0	J0	0	J0	0.0	0	0.0	0	0
5.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:		1		1		1		1			
5.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Other		0		0	0	0	0.0	0	0.0		
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Iviata	110 2100110001011		2	T A	, ,	alues By Major I	JPC and Cabtyp	T 0	<u> </u>	10	1 11
Distribution by Type	1 1 Year or Less	Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	б Total Current Year	Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)		<u> </u>	<u> </u>								
6.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
6.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
6.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
7.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
7.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:				NO	NE						
7.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9) 9.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:	0					0	0.0				
9.3 Defined	n	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
9.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Watur	ווטטוווטוטוטון אוויסוט	OI AII DOING OW	HEU DECEMBEL	T, AL DOUN/AUJU	isieu Carrying V	alues by Major I	ype and Subtyp	C 01 1990C9			
	1	2	3	4	5	6	7	8	9	10	11
	1 Year	Over 1 Year	Over 5 Years	Over 10 Years	Over 20	Total	Column 6 as a	Total from Column	% from Col. 7	Total	Total
Distribution by Type	or Less	Through 5 Years	Through 10 Years	Through 20 Years	Years	Current Year	% of Line 10.7	6 Prior Year	Prior Year	Publicly Traded	Privately Placed
10. Total Bonds Current Year			_	-						•	
10.1 Issuer Obligations.	616,816	2,500,000	3,603,031	0	0	6,719,847	100.0	XXX	XXX	6,719,847	0
10.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:					-					-	-
10.3 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
10.5 Defined	0	0	0	٥	0	0	0.0	XXX	XXX	0	0
10.6 Other	0		Λ	Λ			0.0	XXX	XXXXXX	Λ	Λ
10.7 Totals	616.816	2,500,000	3.603.031		0	6.719.847	100.0	XXX	XXX	6,719,847	
10.8 Line 10.7 as a % of Col. 6	9.2		53.6	0.0	0.0	100.0	XXX	XXX	XXX		0.0
11. Total Bonds Prior Year	9.2	31.2	33.0	0.0	0.0	100.0			٨٨٨	100.0	
	1,818,989		0	0	0	V/V/	XXX	1,818,989	100.0	4 040 000	0
11.1 Issuer Obligations	1,818,989]0]0]0	XXXXXX	XXXXX		100.0	1,818,989]ū
11.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:				_							
11.3 Defined	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
11.5 Defined	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.6 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.7 Totals	1,818,989	0	0	0	0	XXX	XXX	1,818,989	100.0	1,818,989	0
11.8 Line 11.7 as a % of Col. 8	100.0	0.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	616,816	2,500,000	3,603,031	0	0	6,719,847	100.0	1,818,989	100.0	6,719,847	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.4 Other.	0	0	0	0	0	0	0.0	0	0.0	0	XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
12.5 Defined	0	0	0	0	0	0	0.0	٥	0.0	0	XXX
12.6 Other					0		0.0		0.0	۰۵	XXX
12.7 Totals.	616.816	2.500.000	3.603.031	0	0	6.719.847	100.0	1.818.989	100.0	6.719.847	XXX
	9.2		53.6	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
	9.2		53.6	0.0	0.0			XXX			
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	9.2	37.2	53.6	0.0	0.0	100.0	XXX	λλλ	XXX	100.0	XXX
13. Total Privately Placed Bonds	•			_	•	_]]	2.2	Y /Y/	
13.1 Issuer Obligations	0]0	[0	<u>0</u>	0]0	0.0	0	0.0	XXX]0
13.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	XXX]0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:	_	_			_	_				,,,,,,	_
13.3 Defined	0	0	0	0	0	0	0.0	J0	0.0	XXX]0
13.4 Other	0	0	0	0	0	0	0.0	[0	0.0	XXX]0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/											
ASSET-BACKED SECURITIES:											
13.5 Defined	0	00	0	0	0	0	0.0	0	0.0	XXX	0
	•••••••••••••••••••••••••••••••••••••••										
13.6 Other	0	0	0	0	0	0	0.0	0	0.0	XXX	0
	•••••••••••••••••••••••••••••••••••••••	0	0	0 0	0	0	0.0	0	0.0	XXXXXX	0
13.6 Other	•••••••••••••••••••••••••••••••••••••••	0	0 0 0.0	0 0	0 0			0 0 XXX			0

SCHEDULE DA - PART 2

Verification of SHORT-TERM INVESTMENTS Between Years

	1 1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
Book/adjusted carrying value, prior year	757,975	757,975	0	0	0
Cost of short-term investments acquired		31,091,410	0	0	0
3. Increase (decrease) by adjustment	37,555	37,555	0	0	0
Increase (decrease) by foreign exchange adjustment	0	0	0	0	0
Total profit (loss) on disposal of short-term investments		0	0	0	0
Consideration received on disposal of short-term investments	31,270,124	31,270,124	0	0	0
7. Book/adjusted carrying value, current year	616,816	616,816	0	0	0
Total valuation allowance	0	0	0	0	0
9. Subtotal (Lines 7 plus 8)	616,816	616,816	0	0	0
10. Total nonadmitted amounts	0	0	0	0	0
11. Statement value (Lines 9 minus 10)	616,816	616,816	0	0	0
12. Income collected during year	43,821	43,821	0	0	0
13. Income earned during year	43,821	43,821	0	0	0

⁽a) Indicate the category of such assets, for example, joint ventures, transportation equipment:....

Sch. DB-Pt.A-Verification Between Years NONE

Sch. DB-Pt.B-Verification Between Years NONE

Sch. DB-Pt.C-Verification Between Years NONE

Sch. DB-Pt.D-Verification Between Years NONE

Sch. DB-Pt.E-Verification NONE

Sch. DB-Pt. F-Sn. 1 NONE

Sch. DB-Pt. F-Sn. 2 NONE

Sch. S-Pt. 1-Sn. 2 NONE

> Sch. S-Pt. 2 NONE

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	Outstanding S	Surplus Relief	12	13
								Reserve Credit	10	11		Funds
NAIC	Federal							Taken Other Than			Modified	Withheld
Company	ID	Effective					Premiums	for Unearned	Current	Prior	Coinsurance	Under
Code	Number	Date	Name of Company	Location	Type	Premiums	(estimated)	Premiums	Year	Year	Reserve	Coinsurance
Affiliates												·
72052	23-2710210	01/01/1999	Corporate Health Insurance Company	Pennsylvania	SSL/A	41,161	0	0	0	0	0	0
	Total - Affiliates					41,161	0	0	0	0	0	0
0399999.	Totals					41,161	0	0	0	0	0	0

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14
					Paid and					Funds Deposited			Sum of Cols.
NAIC	Federal			Reserve	Unpaid Losses		Total			by and Withheld		Miscellaneous	9 + 10 + 11 + 12
Company	ID	Effective		Credit	Recoverable	Other	(Cols.	Letters of	Trust	from		Balances	+ 13 But Not in
Code	Number	Date	Name of Reinsurer	Taken	(Debit)	Debits	5 + 6 + 7)	Credit	Agreements	Reinsurers	Other	(Credit)	Excess of Col. 8

5

NONE

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business (000 Omitted)

		1	2	3	4	5
		2003	2002	2001	2000	1999
		2000				
A.	OPERATIONS ITEMS					
1.	Premiums	41	119	162	59	10
2.	Title XVIII - Medicare	0	0	0	0	0
3.	Title XIX - Medicaid	0	0	0	0	0
4.	Commissions and reinsurance expense allowance	0	0	0	0	0
5.	Total hospital and medical expenses	0	0	0	0	0
В.	BALANCE SHEET ITEMS					
6.	Premiums receivable	0	0	0	0	0
7.	Claims payable	0	0	0	13	0
8.	Reinsurance recoverable on paid losses	0	0	0	0	0
9.	Experience rating refunds due or unpaid	0	0	0	0	0
10.	Commissions and reinsurance expense allowances unpaid	0	0	0	0	0
11.	Unauthorized reinsurance offset	0	0	0	0	0
C.	UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12.	Funds deposited by and withheld from (F)	0	0	0	0	0
13.	Letters of credit (L)	0	0	0	0	0
14.	Trust agreements (T)	0	0	0	0	0
15.	Other (O)	0	0	0	0	0

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	Nestatement of Dalance Offeet to Iden	1 As Reported	2 Restatement	Restated
	ACCETS (Dans 2, Cal. 2)	(Net of Ceded)	Adjustments	(Gross of Ceded)
	ASSETS (Page 2, Col. 3) Cash and invested assets (Line 10)	44 000 000	0	44 000 000
1.	Accident and health premiums due and unpaid (Line 12)			
2.	Amounts recoverable from reinsurers (Line 13.1)			
3.	Amounts recoverable from reinsurers (Line 13.1)			
4.				
5.	All other admitted assets (balance)			
6.	Totals assets (Line 26)	12,301,104	0	12,301,104
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)	1,426,675	0	1,426,675
8.	Accrued medical incentive pool and bonus payments (Line 2)	0	0	0
9.	Premiums received in advance (Line 8)	22,991	0	22,991
10.	Reinsurance in unauthorized companies (Line 18)	0	0	0
11.	All other liabilities (balance)	1,652,096	0	1,652,096
12.	Total liabilities (Line 22)	3,101,762	0	3,101,762
13.	Total capital and surplus (Line 30)	9,199,342	XXX	9,199,342
14.	Total liabilities, capital and surplus (Line 31)	12,301,104	0	12,301,104
	NET CREDIT FOR CEDED REINSURANCE			
15.	Claims unpaid	0		
16.	Accrued medical incentive pool	0		
17.	Premiums received in advance	0		
18.	Reinsurance recoverable on paid losses	0		
19.	Other ceded reinsurance recoverables	0		
20.	Total ceded reinsurance recoverables	0		
21.	Premiums receivable	0		
22.	Unauthorized reinsurance			
23.	Other ceded reinsurance payables/offsets			
24.	Total ceded reinsurance payables/offsets			
	Total net credit for ceded reinsurance			

SCHEDULE Y (Continued)

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

	PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES											
1	2	3	4	5	6	7	8	9	10	11	12	13
						Income/						
						(Disbursements)				Any Other		Reinsurance
					Purchases, Sales	Incurred in				Material Activity		Recoverable/
					or Exchanges of	Connection with	Management	Income/		Not in the		(Payable) on
					Loans, Securities,	Guarantees or	Agreements	(Disbursements)		Ordinary		Losses and/or
NAIC	Federal	Names of Insurers			Real Estate,	Undertakings	and	Incurred under		Course of the		Reserve Credit
Company	ID	and Parent, Subsidiaries	Shareholder	Capital	Mortgage Loans or	for the Benefit	Service	Reinsurance		Insurer's		Taken/
Code	Number	or Affiliates	Dividends	Contributions	Other Investments	of any Affiliate(s)	Contracts	Agreements	*	Business	Totals	(Liability)
Affiliated Transa	ctions	•				• • • • • • • • • • • • • • • • • • • •	•	<u> </u>				, , , , ,
00000	23-2229683	Aetna Inc	319,400,000	30.000.000	0	0	580,339,009	0		0	929,739,009	0
72052	23-2710210	Corporate Health Insurance Company	(38,900,000)	0	0	0	(52,415,429)	8,612,234		0	(82,703,195)	(10,279,635)
78700	06-0876836	Aetna Health and Life Insurance Company	(00,000,000)	0	0	0	(3,932,004)	(55,456,926)		0	(59,388,930)	(1,040,403,936)
84450	57-0805126	Aetna Health Insurance Company of New York	(17,000,000)	Λ	0		(7,986,812)	00,400,020		Λ	(24,986,812)	(1,040,400,330)
00000	37-0003120		(17,000,000)				(1,300,012)				(24,300,012)	4,488,696
00000		Aetna Risk Indemnity Company Limited	0	0	0		(2,778,000)	0			(2,778,000)	1,719,037
47077	23-2570619	Aetna Life & Casualty Bermuda Limited	0	0	V	0	(2,778,000)	U			(2,778,000)	1,7 19,037
60054	06-6033492	Aetna Dental Inc. (DE)	79,143,817	(321,731,758)	ار	0	(335)	66 000 704	·····]	(369,240,351)	1 017 674 046
00004	06 1070755	AUD Heldings Inc.	/3,050,000	(321,731,758)		0	(193,573,144)	66,920,734			(309,240,351)	1,017,674,246
00000	06-1270755	AHP Holdings, Inc	(3,850,000)	(5,950,000)	0	0	6,352,594	/// // // // // // // // // // // // //]ū	(3,447,406)	0
36153	06-1286276	Aetna Insurance Company of Connecticut	(8,900,000)	0	0	0	(10,922,358)	(11,175,741)		<u>0</u>	(30,998,099)	16,521,957
00000	06-1501445	CMBS Holdings, L.L.C	(16,929,000)	(8,019,000)	0	0]0	0		J0	(24,948,000)	0
00000		Tanker Six, LLC	0	1,083,000	0	0	0	0		0	1,083,000	0
00000		Canal Place, LLC	0	(1,711,845)	0	0	0	0		0	(1,711,845)	0
00000		Aetna Government Health Plans, Inc	0	1,000′	0	0	00	0		0	1,000′	0
00000		Circulation, LLC	(16,330,301)	3,750,250	0	0	0	0		0	(12,580,051)	0
00000	06-1474531	BPC Equity, Inc	(18,852)	0	0	0	0	0		0	(18,852)	0
00000		BPC Equity, LLC	(1,866,395)	0	0	0	0	0		0	(1,866,395)	0
00000	11-3667142	Spatium, LLC	(29,573,998)	332,571,814	0	0	0	0		0	302,997,816	0
00000		Koll Center Newport A	0	6,289	0	0	0	0		0	6,289	0
00000		Azalea Mall, LLC	0	250	0	0	0	0		0	250	0
00000		Commercial Avenue and First Street Investors LLC	(1,675,271)	0	0	0	0	0		0	(1,675,271)	0
00000	30-0123754	Aetna Health Holdings, LLC	362,275,000	45,000,000	0	0	0	0		0	407,275,000	0
95003	06-1345436	Aetna Health Inc. (AZ)	(9,000,000)	0	0	0	(44,365,786)	(50,000)		0	(53,415,786)	0
00000	95-3402799	Aetna Health of California Inc.	(1,000,000)	(98.000.000)	0	0	(96,890,120)	(50,000)	ll	0	(195,940,120)	0
95256	84-1312793	Aetna Health Inc. (CO)	(29,000,000)	0	0	0	(14,613,943)	51,528		0	(43.562.415)	77.540
95935	23-2442048	Aetna Health Inc. (CT)	(21,800,000)	0	0	0	(17,581,536)	0		0	(39,381,536)	0
95245	23-2470575	Aetna Health Inc. (DE)	(3,700,000)	0	0	0	(3,533,916)	459,384		0	(6,774,532)	70.789
95088	59-2411584	Aetna Health Inc. (FL)	(14.300.000)	0	0	0	(220,863,885)	5.049.220			(230,114,665)	0
95094	58-1649568	Aetna Health Inc. (GA)	(27,500,000)	0	0	0	(29,163,343)	0		0	(56,663,343)	0
95397	06-1055955	Aetna Health of Illinois Inc.	(23,400,000)	n	n	0	(16,081,696)	(120,060)		n	(39,601,756)	87.239
95002	72-1100143	Aetna Health Inc. (LA)	(6,000,000)	n	n	0	(576,667)	n		n	(6,576,667)	n
95590	52-1353802	Aetna Health Inc. (MD)	(41,500,000)	n	n	n	(77,913,796)	585,652		n	(118,828,144)	1,137,177
95236	52-1524249	Aetna Health Inc. (MB)	(41,500,000)	n	n	n	(9,333,965)	138,047		n	(110,020,144)	n
95756	23-2861565	Aetna Health Inc. (MI)	(13,300,000)	0 N		۸	(2,042,168)	(41,160)		n	(2,083,328)	
95810	23-2861568	Aetna Health Inc. (MO)	(7,000,000)	0 n		۸	(2,042,100)	(+1,100)			(16,912,919)	۸ ا
95237	23-2627296	Aetna Health Inc. (NH)	(1,000,000)	0 ^		۰۰	42,427	۸		U	42,427	0
95287	52-1270921	Aetna Health Inc. (NJ)	(177,000,000)	0 ^		۰۰	(219,560,239)	(21,390,934)		U	(417,951,173)	3,535,603
95234	22-2663623	Aetna Health Inc. (NY)	(177,000,000)	0	0		(192,343,548)	(21,030,304)	·····	0	(387,343,548)	,3,3,3,003
95343	56-1941613	Aetna Health of the Carolinas Inc.	(195,000,000)	0	0		(192,343,546)	2,015,155	·····]	(307,343,546)	0
96518	34-1399736	Aetna Health Inc. (OH)	(3,900,000)	U	U	0	(8,914,294)	(50,000)]	(10,799,139)	
95757	23-2861563	Aetna Health Inc. (OH)	(44,500,000)	U	V	0	(40,730,117)	(50,000)			(30,200,117)	4 070
95757	23-2001303		(3,800,000)	0		0	(16,466,300)	(409,573)			(22,675,873)	1,879
	23-2169745	Aetna Health Inc. (PA)	(134,300,000)		0	0	(132,913,922)	(746,450)			(267,960,372)	831,516
95006	62-1327181	Aetna Health Inc. (TN)	(4,778,000)		0	0	(14,428,043)	62,660]0	(19,143,383)	4.507.000
95490	76-0189680	Aetna Health Inc. (TX)	(51,200,000)	0	0	0	(114,600,985)	5,978,827		0	(159,822,158)	4,537,892
00000	22-3187443	NYLCare Health Plans, Inc	31,360,000	450,000	0	0	0	0		J0	31,810,000	0
95517	01-0504252	Aetna Health Inc. (ME)	(9,200,000)	0	0	0	(21,027,930)	(344,369)	······	J0	(30,572,299)	0
47060	91-1662406	Aetna Health Inc. (WA)	(12,200,000)	0	0	0	(9,306,072)	0		J0	(21,506,072)	0

Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE Y (Continued)

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	2	1	E	relice in the morte	7	0	0	10	11	10	10
1	2	S S	4	5	0	. /	0	9	10	''	12	13
						Income/						
						(Disbursements)				Any Other		Reinsurance
					Purchases, Sales	` Incurred in '				Material Activity		Recoverable/
					or Exchanges of	Connection with	Management	Income/		Not in the		(Payable) on
												(i ayabie) oii
					Loans, Securities,	Guarantees or	Agreements	(Disbursements)		Ordinary		Losses and/or
NAIC	Federal	Names of Insurers			Real Estate,	Undertakings	and	Incurred under		Course of the		Reserve Credit
Company	ID	and Parent, Subsidiaries	Shareholder	Capital	Mortgage Loans or	for the Benefit	Service	Reinsurance		Insurer's		Taken/
Code	Number	or Affiliates	Dividends	Contributions	Other Investments	of any Affiliate(s)	Contracts	Agreements	*	Business	Totals	(Liability)
97705	13-3139500	New York Life and Health Insurance Company	٥١	(450.000)	٥١	0	67.145	۱	I	1 0	(382.855)	0
		AET Health Care Plan, Inc.	0	(75,000,000)	0	0	(1,123,921)	0		0	(76,123,921)	
			(0.400.000)				(1,123,921)				(20,000,444)	0
00000		Aetna Dental of California Inc	(8,100,000)	(2,000,000)	0	0		0		<u>0</u>	(22,280,114)	0
11183		Aetna Dental Inc. (NJ)	0	0	0	0	(1,273,505)	0		0	(1,273,505)	
47039	23-2570616	Aetna Dental Inc. (PA)	(1,000,000)	0	0	0	(268,461)	0		0	(1,268,461)	0
95910	06-1177531	Aetna Dental Inc. (TX)	(5.200.000)	0	0	0	(11.915.430)	(38.228)	l	l0	(17.153.658)	0
	22-2725051	Aetna Dental Maintenance Organization, Inc	0	0	0	0	52.386	0	l	0	52.386	0
00000		Aet Health Care Plan of California. Inc.	0	(11.900.000)	0	0	(2,454,723)	0	l	0	(14,354,723)	0
		Aetna Health Insurance Company of Connecticut	0	l0	0	0	(1,131,665)	0		0	(1,131,665)	
00000		Aetna Health Management, LLC	192,743,000	111,900,000	0	0	1,036,272,530	0		0	1,340,915,530	0
9999999.	Control Totals	·	0	0	0	0	0	0	XXX	0	0	0

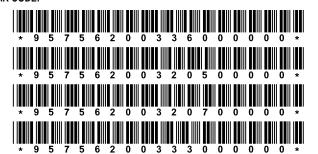
Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation) SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	MARCH FILING	RESPONSES
1.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	No
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes
3.	Will an actuarial certification be filed with this statement by March 1?	Yes
4.	Will the Risk-Based Capital Report be filed with the NAIC by March 1?	Yes
5.	Will the Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	Yes
6.	Will the SVO Compliance Certification be filed by March 1?	Yes
7.	Will the Life Supplement be filed with the state of domicile and the NAIC by March 1?	No
8.	Will the Property/Casualty Supplement be filed with the state of domicile and the NAIC by March 1?	No
	APRIL FILING	
9.	Will Management's Discussion and Analysis be filed by April 1?	Yes
10.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile by April 1?	No
11.	Will the Investment Risk Interrogatories be filed by April 1?	Yes
	JUNE FILING	
12.	Will an audited financial report be filed by June 1 with the state of domicile?	Yes

BAR CODE:

EXPLANATIONS:



Statement as of December 31, 2003 of the **Aetna Health Inc. (a Michigan corporation) Overflow Page for Write-Ins**

Additional Write-ins for Statement of Revenue:

Additional Write inclose Statement of Neventaer		
	1	2
	Current Year	Prior Year
4704. Correction of federal tax incurred in prior period	(77,587)	0
4797. Summary of remaining write-ins for Line 47	(77,587)	0

Statement as of December 31, 2003 of the Aetna Health Inc. (a Michigan corporation)

Overflow Page for Write-Ins



LIFE SUPPLEMENTS TO BE FILL DO BEFREARCH 1

For the Year Ended December 31, 2003

Of the.....Aetna Health Inc. (a Michigan corporation)

ADDRESSSouthfield MI 43034-4728

NAIC Group Code.....0001

NAIC Company Code.....95756

Employer's ID Number.....23-2861565

Ex. 5-Aggregate Reserve for Life Contracts NONE

Ex. 5-Interrogatories NONE

Ex. 7-Deposit-Type Contracts NONE

Sch. S-Pt. 1-Sn. 1 NONE

Sch. S-Pt. 3-Sn. 1 NONE Supplement for the year 2003 of the Aetna Health Inc. (a Michigan corporation)

DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0001

NAIC Company Code.....95756

LIFE INSURANCE

			VIIIOL			
		1	2	3	4	5
			Credit Life			
			(Group and			
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		•	•		
1.	Life insurance	0	0	0	0	0
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations		0	0	0	0
5.	Totals (Sum of Lines 1 to 4)		0	0	0	0
0.	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums			0	0	
6.3	Applied to provide paid-up additions or shorten the endowment					
0.5	or promium paying poriod	0	0	0	0	1
6.4	or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4)			Λ	Λ	
6.5	Tatala (Cum of Lines C 4 to C 4)		0	0	0	
0.5	Annuities:		0	0	0	
7.4						
7.1	Paid in cash or left on deposit		0	0	0	0
7.2	Applied to provide paid-up annuities		0	0	0	0
7.3	Other		0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	C
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits		0	0	0	C
10.	Matured endowments		0	0	0	C
11.	Annuity benefits		0	0	0	C
12.	Surrender values and withdrawals for life contracts	0	0	0	0	C
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals		0	0	0	0
			S OF WRITE-INS	-		
1301.		I0	OF WKITE-ING	0	0	1
1301.			۸	۸	۸	
1302.			0	0	0	I
	Owner, of a mainima with in fact in 42 feet and 5	0	0	0	0	I
	Summary of remaining write-ins for Line 13 from overflow page				0	J0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	00	0	0	0	0

	Ordinary			Credit Life and Individual)		Group	In	dustrial	Total	
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of			l		
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0			0	0	0	0	0	0
18.3 Totals paid	0	0	0		0	0	0	0	0	0
18.5 Amount rejected			0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a)0	0	0	0	0	0	0
21. Issued during year		0	0		0	0	0	0	0	0
22. Other changes to in force (Net)		0	0	0	0	0	0	0	0	0
23. In force December 31 of current year					0	0	0	0	0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
			0	0	0
24.2 Credit (group and individual)		0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)		0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only		0	0	0	0
25.5 All other (b)		0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 25.6)	0	0	0	0	0

⁽b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

Supplement for the year 2003 of the Aetna Health Inc. (a Michigan corporation)

Overflow Page for Write-Ins



PROPERTY/CASUALTY SUPPLEMENTS TO BE FILL ON OB FREE RCH 1

For the Year Ended December 31, 2003

Of the.....Aetna Health Inc. (a Michigan corporation)

ADDRESSSouthfield MI 43034-4728

NAIC Group Code.....0001

NAIC Company Code.....95756

Employer's ID Number.....23-2861565

Sch. F-Pt. 1 NONE

Sch. F-Pt. 3 NONE

Sch. P-Pt. 1-Summary NONE

Sch. P-Pt. 1A NONE

Sch. P-Pt. 1B NONE

Sch. P-Pt. 1C NONE

Sch. P-Pt. 1D NONE

Sch. P-Pt. 1E NONE

Sch. P-Pt. 1F-Sn. 1 NONE

Sch. P-Pt. 1F-Sn. 2 NONE

> Sch. P-Pt. 1G NONE

Sch. P-Pt. 1H-Sn. 1 NONE

Sch. P-Pt. 1H-Sn. 2 NONE

> Sch. P-Pt. 1I NONE

Sch. P-Pt. 1J NONE

Sch. P-Pt. 1K NONE

Sch. P-Pt. 1L NONE

Sch. P-Pt. 1M NONE

Sch. P-Pt. 1N NONE

Sch. P-Pt. 10 NONE Sch. P-Pt. 1P NONE

Sch. P-Pt. 1R-Sn. 1 NONE

Sch. P-Pt. 1R-Sn. 2 NONE

> Sch. P-Pt. 1S NONE

Sch. P-Pt. 2-Summary NONE

Sch. P-Pt. 2A NONE

Sch. P-Pt. 2B NONE

Sch. P-Pt. 2C NONE

Sch. P-Pt. 2D NONE

Sch. P-Pt. 2E NONE

Sch. P-Pt. 2F-Sn. 1 NONE

Sch. P-Pt. 2F-Sn. 2 NONE

> Sch. P-Pt. 2G NONE

Sch. P-Pt. 2H-Sn. 1 NONE

Sch. P-Pt. 2H-Sn. 2 NONE

> Sch. P-Pt. 2I NONE

Sch. P-Pt. 2J NONE

Sch. P-Pt. 2K NONE

Sch. P-Pt. 2L NONE

Sch. P-Pt. 2M NONE

PS22, PS23, PS24, PS25, PS26, PS27, PS28, PS29

Sch. P-Pt. 2N NONE

Sch. P-Pt. 20 NONE

Sch. P-Pt. 2P NONE

Sch. P-Pt. 2R-Sn. 1 NONE

Sch. P-Pt. 2R-Sn. 2 NONE

> Sch. P-Pt. 2S NONE

Supplement for the year 2003 of the Aetna Health Inc. (a Michigan corporation)

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0001 NAIC Company Code....95756

BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code0001 NAIC Company Code95756			BUSINESS	S IN GRAND TO)TAL DURING	3 THE YEAR						
	Gross Premiums, I	ncluding Policy and	3	4	5	6	7	8	9	10	11	12
	Membership Fees I	ess Return Premiums	-									
		Policies not Taken	Dividends Paid or					Direct Defense	Direct Defense	Direct Defense		
	1	2	Credited to		Direct Losses			and Cost	and Cost	and Cost	Commissions	Taxes,
	Direct Premiums	Direct Premiums	Policyholders on	Direct Unearned	Paid	Direct Losses	Direct Losses	Containment	Containment	Containment	and Brokerage	Licenses and
li (D)												
Line of Business	Written	Earned	Direct Business	Premium Reserves	(deducting salvage) Incurred	Unpaid	Expense Paid	Expense Incurred	Expense Unpaid	Expenses	Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	00	0	0	0	0	0	0	0	0	0	0	0
Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	n	n	n	n	0	0	0	n	0	0	n	0
9. Inland marine	n	n	n	n	n	n	n	n	n	n	n	n
10. Financial quaranty	n	n	n		1		n	n	n	n	n	n
11. Medical malpractice	n	n	n		1		n	n	n	n	n	
12. Earthquake		0			1	1		l]o]		
13. Group accident and health (b)	0	0			0	0	0	0		٥		
13. Group accident and nearth (b)	0	0	0]0	0	0	0	0	0	0 n	0	0
14. Credit A & H (group and individual)	0	0	0	0	0	0	0	0]0	0	0	0
15.1 Collectively renewable A&H (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A & H (b)	0	0	00	00	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b)	0	0	0	0		0	0	0	0	0	0	0
15.5 Other accident only	00	0	0	0	NO	0	0	0	0	0	0	0
15.6 All other A & H (b)	0	0	0	0	(0	0	0	0	0	0	0
15.7 Federal employees health benefits program premium (b)	0	0	0	0		0	0	0	0	0	0	0
16. Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
17. Other liability	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	00	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage	n	0	n	0	0	0	n	n	n	n	n	n
21.2 Commercial auto physical damage	n	n	n	n	n	n	n	n	n	n	n	n
22. Aircraft (all perils)	n	n	n	n	n	n	n	n	n	n	n	n
23. Fidelity					0							
24. Surety	0	0			0	0	0	0		0		
24. Surety	0	0	0]0	0	0	0	0	0	0 n	0	0
26. Burglary and theft	. 0]ū]0]ū	10	0]0	10]ū	0]ū	0
27. Boiler and machinery	0	0	10	J0	10]0	0	10]0	J0	[0	0
28. Credit	. 0	0]0]0]0]0	0	10]0	J0	[0	0
33. Aggregate write-ins for other lines of business	0	0	0]0]0	0	0]0]0	0	[0	0
34. TOTALS (a)	0	0	0	J0	<u> </u>	0	0	0	0	0	0	0
				DETA	ILS OF WRITE-INS							
3301	0	0	0	0	0	0	0	0	0	0	0	0
3302	0	0	0	0	0	0	0	0	0	0	0	0
3303	0	0	0	0	0	0	0	0	0	0	0	0
3398. Summary of remaining write-ins for Line 33 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3399. TOTALS (Lines 3301 thru 3303 plus 3398) (Line 33 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 34 \$.........0.

(b) For health business on indiciated lines report: Number of persons insured under PPO managed care products..........0 and number of persons insured under indemnity only products...........0.

Supplement for the year 2003 of the **Aetna Health Inc. (a Michigan corporation)**

Overflow Page for Write-Ins